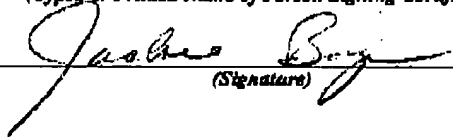
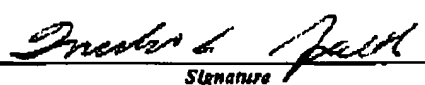
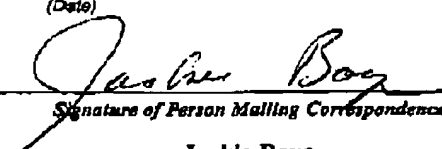


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. SCB-0006
Applicant(s): Bernardo Martinez-Tovar			
Application No. 09/470,343	Filing Date 12/22/1999	Examiner Troy Chambers	Group Art Unit 3641
Invention: TITANIUM SEMICONDUCTOR BRIDGE IGNITER			
<div style="text-align: right;">RECEIVED CENTRAL FAX CENTER SEP 21 2005</div> <p>I hereby certify that this <u>Amendment Transmittal(1);Amendment(14);RCE(1);Certificate of Fax(1)</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571 273-8300</u>) on <u>September 21, 2005</u> (Date)</p> <div style="text-align: right;"><p><u>Jackie Boya</u> (Typed or Printed Name of Person Signing Certificate)</p><p><u></u> (Signature)</p></div> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. SCB-0006	
Applicant(s): Bernardo Martinez-Tovar						
Application No. 09/470,343	Filing Date 12/22/1999	Examiner Troy Chambers	Customer No. 23413	Group Art Unit 3641	Confirmation No. 6032	
Invention: TITANIUM SEMICONDUCTOR BRIDGE IGNITER						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	18 -	38 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	5 -	5 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<div style="display: flex; flex-direction: row;"><div style="flex: 1;"><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130</p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p><p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p><p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p></div><div style="flex: 1; padding-top: 20px;">Dated: September 21, 2005</div></div>						
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p style="text-align: center;"> Signature</p><div style="border: 1px solid black; padding: 5px;"><p>Frederick A. Spaeth Registration No: 33,793 Customer No: 23413 Telephone No: 860-286-2929</p></div></div><div style="width: 50%; border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>September 21, 2005</u>.</p><p style="text-align: center;">(Date)</p><p style="text-align: center;"> Signature of Person Mailing Correspondence</p><p style="text-align: center;">Jackie Boya Typed or Printed Name of Person Mailing Correspondence</p></div></div>						
cc:						

P111LARGE/REV09